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37833

7590

04/03/2008

LITMAN LAW OFFICES, LTD.
 P.O. BOX 15035
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(Depositor's name)
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(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/577,739

05/02/2006

Sadat M. Ali

21823.01 5177
 06/10/2008 AWONDAF2 00000126 10577739

TITLE OF INVENTION: PEPTIDE FOR PROMOTING HEALING OF FRACTURES

01 FC:2501

720.00 OP

02 FC:1504

300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

YES

\$720

\$0

\$0

\$720

07/03/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
AUDET, MAURY A	1654	530-327000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 RICHARD C. LITMAN

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Dolph H. Torrence

Date

06/09/2008

Typed or printed name

DOLPH H. TORRENCE

Registration No.

34,501

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Attorney Docket No. 21823.01

Customer No. 37833

Confirmation No. 5177

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN THE PATENT APPLICATION OF:

APPLICANT : **SADAT M. ALI**

APPL. NO. : **10/577,739**

ART UNIT : **1654**

FILED : **JUNE 2, 2006**

EXAMINER : **AUDET, MAURY**

FOR : **PEPTIDE FOR PROMOTING HEALING OF FRACTURES**

MAIL STOP **ISSUE FEE**
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TRANSMITTAL SHEET

Sir:


Transmitted herewith are:

1. Form PTOL-85.
2. Check in the amount of \$1,020.00 (Utility issue fee and Publication Fee).

Any additional fees pertaining to this matter may be charged to Deposit Account No. 12-1662 of the Richard C. Litman.

Respectfully submitted,

Date: 06/09/2008


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(703) 486-1000